

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MB</i>		
O.I.P.E. CLASSIFIER		<i>413</i>	<i>6/22/99</i>
FORMALITY REVIEW		<i>7/14/99</i>	<i>7/18/99</i>
		<i>7/18/99</i>	<i>8/12/99</i>

INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
✓	..... Allowed	I	..... Interference
✓	(Through numeral)..... Canceled	A	..... Appeal
✓	..... Restricted	O	..... Objected

Claim	Original	Date
1	✓	6/22/99
2	✓	6/22/99
3	✓	6/22/99
4	✓	6/22/99
5	✓	6/22/99
6	✓	6/22/99
7	✓	6/22/99
8	✓	6/22/99
9	✓	6/22/99
10	✓	6/22/99
11	✓	6/22/99
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45	✓	6/22/99
46	✓	6/22/99
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48	✓	6/22/99
49	✓	6/22/99
50	✓	6/22/99

Claim	Original	Date
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Claim	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here